## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 19 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

98

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms. Melina Perdue Date of Receipt Mailing Address P O Box 5 03 2015 11 City Zip Code State Transaction ID: 22791602 VA Radford 24143-0005 Amount of Each Receipt this Period FEC ID number of contributing 350.00 federal political committee. Name of Employer Occupation Interim Chief Executive Officer Carilion New River Valley Medical Cent Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Heather S Shepardson Date of Receipt Mailing Address 1355 S. Main Street 11 03 2015 City State Zip Code Transaction ID: 22791603 VA Rocky Mount 24151-6200 Amount of Each Receipt this Period FEC ID number of contributing 350.00 federal political committee. Name of Employer Occupation Carilion Clinic **Director Human Resources** Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr Ken Armstrong Date of Receipt Mailing Address 829 Moultire Ct 11 03 2015 City Zip Code State Transaction ID: 22792651 Virginia Bch VA 23455-4752 Amount of Each Receipt this Period FEC ID number of contributing 350.00 С federal political committee. Name of Employer Occupation Healthcare Administrator Sentara Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 1050.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9